

UTILIZATION REVIEW QUALITY IMPROVEMENT SUPERVISOR

Class No. 004304

■ CLASSIFICATION PURPOSE

Under general supervision, to plan, organize, direct, and evaluate the work of the Quality Assurance program staff; and to perform related work as required.

■ DISTINGUISHING CHARACTERISTICS

This is the supervisory level in the Utilization Review series found in the Health and Human Services Agency (HHSA). Classes in this series are responsible for implementing the procedures and requirements of Mental Health Services' (MHS) State-approved Quality Management and Utilization Review Plan. The Utilization Review Quality Improvement Supervisor differs from the next lower class, Utilization Review Specialist, which has primary responsibility for review of determining the appropriateness of medical and psychiatric diagnosis and billings, in that the supervisor provides authorization for extended hospital stays and monitors Utilization Review/Quality Improvement activities of MHS programs.

■ FUNCTIONS

The examples of functions listed in the class specification are representative but not necessarily exhaustive or descriptive of any one position in the class. Management is not precluded from assigning other related functions not listed herein if such duties are a logical assignment for the position.

Essential Functions:

- 1. Schedules work and assign duties to Quality Improvement Program staff.
- 2. Reviews decisions made by Quality Improvement staff.
- 3. Monitors the work of staff to ensure compliance with State and Federal guidelines.
- 4. Processes medical documentation for reimbursement in a complete and timely manner.
- 5. Monitors the Utilization Review and Quality Improvement activities of MHS programs.
- Evaluates the more difficult and complex records to determine documentation of treatment modalities and appropriate level of care.
- 7. Reviews identified quality issues.
- 8. Meets with administrative staff and State and Federal review boards to resolve differences in interpretation and documentation.
- Attends and monitors meetings and acts as staff support to the Utilization Review Committee and Quality Improvement Committee.
- 10. Provides training on regulation documentation and procedure to MHS providers and Quality Improvement staff.
- 11. Evaluates employee performance.
- 12. Writes statistical and narrative reports.
- 13. Coordinates quality assurance and improvement projects as requested.
- 14. Oversees site Medi-Cal certification of assigned programs.
- 15. Provides responsive, high quality service to County employees, representatives of outside agencies and members of the public by providing accurate, complete and up-to-date information, in a courteous, efficient and timely manner.

■ KNOWLEDGE, SKILLS AND ABILITIES

Knowledge of:

- Psychiatric and medical treatment modalities and terminology.
- Appropriate charting techniques and interpretation.
- State and Federal regulations related to Mental Health Services.
- Medi-Cal and Medi-Care review and audit processes.
- Scope of diverse disciplines related to mental health fiscal policies regarding third party reimbursement.
- County and contract provider services requiring Utilization Review.
- Most recent diagnostic and Statistical Manual requirements.
- Medical records documentation standards, including standards for clinical records documentation and uniform medical records, as well as those of Joint Commission on Accreditation of Hospitals.
- Patient's rights, specifically regarding provider denials, and client complaint, grievance and appeals process.
- Short-Doyle/Medi-Cal certification standards.
- Principles and practices of supervision and training.
- County and departmental policies and procedures.
- Narrative and statistical report writing.
- Commission on Accreditation for Rehabilitation Facilities (CARF).
- The General Management System in principle and in practice.
- County customer service objectives and strategies.

Skills and Abilities to:

- Plan, organize, supervise, and evaluate the work of subordinates.
- Determine whether symptom documented in medical records support diagnosis.
- Audit documentation and make accurate assessment of diagnosis and type and level of care specified in medical charts, records, and summaries appropriate to the population of the program.
- Interpret and communicate policies and regulations effectively, orally, and in writing.
- Identify, define, and develop solutions for problems related to the Utilization Review Plan, processes, or procedures.
- Write reports.
- Train subordinates as well as professional staff, through demonstrated training skills.
- Establish and maintain effective working relationships with hospitals, clinic and administrative staff, patients, contractors, and State and Federal reviewers.
- Communicate effectively orally and in writing.
- Treat County employees, representatives of outside agencies and members of the public with courtesy and respect.
- Assess the customer's immediate needs and ensure customer's receipt of needed services through personal service or referral.
- Exercise appropriate judgment in answering questions and releasing information; analyze and project consequences of decisions and/or recommendations.

■ EDUCATION/EXPERIENCE

Education, training, and/or experience that demonstrate possession of the knowledge, skills and abilities listed above. Examples of qualifying education/experience are: at least three (3) years of recent <u>licensed</u> clinical experience in an acute care psychiatric hospital or outpatient facility performing the duties of a nurse, clinical social worker, or related professional. Duties must have included charting, or performing oversight of medical record documentation. Supervising and training experience is highly desirable.

■ ESSENTIAL PHYSICAL CHARACTERISTICS

The physical characteristics described here are representative of those that must be met by an employee to successfully perform the essential functions of the classification. Reasonable accommodation may be made to enable an individual with qualified disabilities to perform the essential functions of a job, on a case-by-case basis.

Frequent: sitting, walking, bending of neck, and repetitive use of dominant hand. Occasional: standing, bending of waist, squatting, climbing, kneeling, twisting of neck and waist, simple grasping with hands, pushing and pulling with hands, reaching above and below shoulder level, and lifting and carrying of files weighing up to 15 pounds.

■ SPECIAL NOTES, LICENSES, OR REQUIREMENTS

License

A valid California class C driver's license, which must be maintained throughout employment in this class, is required at time of appointment, or the ability to arrange necessary and timely transportation for field travel. Employees in this class may be required to use their own vehicle.

Certification/Registration

None Required.

Working Conditions

Office environment; exposure to computer screens.

Background Investigation

Must have a reputation for honesty and trustworthiness. Misdemeanor and/or felony convictions may be disqualifying depending on type, number, severity, and recency. Prior to appointment, candidates will be subject to a background investigation.

Probationary Period

Incumbents appointed to permanent positions in this class shall serve a probationary period of 6 months (Civil Service Rule 4.2.5).

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Utilization Review Quality Improvement Supervisor Class No. (004304)

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